



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4391

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------|
| SERIAL NUMBER 09/937,096 | FILING DATE 12/19/2001 RULE | CLASS 375 | GROUP ART UNIT 2613 | ATTORNEY DOCKET NO. Q64914 |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------|

APPLICANTS

Ruben Gonzales, Queensland, AUSTRALIA;

**** CONTINUING DATA *******
 This application is a 371 of PCT/AU00/01296 10/20/2000
 VL

**** FOREIGN APPLICATIONS *******
 AUSTRALIA PQ 3603 10/22/1999
 AUSTRALIA PQ 8661 07/07/2000
 VL

**** SMALL ENTITY ****

| | | | | | |
|--|--|----------------------------------|-------------------------|-----------------------|-----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials VL | STATE OR COUNTRY AUSTRALIA | SHEETS DRAWING 46 | TOTAL CLAIMS 85 | INDEPENDENT CLAIMS 18 |
|--|--|----------------------------------|-------------------------|-----------------------|-----------------------------|

ADDRESS
 Sughrue Mion
 2100 Pennsylvania Avenue NW
 Washington, DC
 20037-3213

TITLE
 Object oriented video system

| | | |
|------------------------------------|---|---|
| FILING FEE RECEIVED 1750 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|---|---|